WISCONSIN STATE LEGISLATURE COMMITTEE HEARING RECORDS

1997-98

(session vear)

Senate

(Assembly, Senate or Joint)

Committee on Education (SC-Ed)

File Naming Example:

Record of Comm. Proceedings ... RCP

- 505hr_AC-Ed_RCP_pt01a
- > 05hr_AC-Ed_RCP_pt01b
- > 05hr_AC-Ed_RCP_pt02

NOTICES ...

Committee Hearings ... CH (Public Hearing Announcements)

> **

Executive Sessions ... ES

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🕨 <u>Committee Reports</u> ... CR

> **

Record of Comm. Proceedings ... RCP

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INFORMATION COLLECTED BY COMMITTEE CLERK <u>FOR</u> AND <u>AGAINST</u> PROPOSAL

Appointments ... Appt

>97hr_SC-Ed_Appt_pt04

Name: Charles Pittelkow

- Clearinghouse Rules ... CRule
- > **
- Hearing Records ... HR (bills and resolutions)
- > **
- Miscellaneous ... Misc
- > **



James R. Morgan Chairman Paul M. Holzem David L. McRoberts Robert G. Borgwardt Joanne R. Orr Dorothy C. Johnson

STATE OF WISCONSIN ETHICS BOARD

On the capitol square at: 44 EAST MIFFLIN STREET, STE 601 MADISON, WISCONSIN 53703-2800 phone: 608/266-8123 fax: 608/264-9309 ethics@mail.state.wi.us

> Roth Judd Director

NOMINEE:

Charles R. Pittelkow

POSITION:

Member, Savings Bank Review Board

(professional member)

STATUTORY

REFERENCE:

15.185 Department of financial institutions; attached boards and offices.

(4) Savings bank review board. There is created in the department of financial institutions a savings bank review board consisting of 7 members, at least 5 of whom shall have not less than 10 years' experience in the savings bank or savings and loan association business in this state, appointed for 4-year terms.

3/24/98 CW

SENATE COMMITTEE ON LABOR, TRANSPORTATION, AND FINANCIAL INSTITUTIONS: Senators Plache, (Chair), Moore, Decker, Zien, Darling, and Farrow.

Mail or Fax to:

Wisconsin Ethics Board 44 E. Mifflin St., Suite 601 Madison, WI 53703-2800 Fax: (608) 264-9309



Information must be current as of this Appointment/Nomination date:

MAR 1 2 1998

Print legibly in black ink or type

Statement of Economic Interests

NAME:

Pittelkow, Charles R.

Member,

STATE POSITION

Savings Bank Review Board

HELD OR SOUGHT:

ABOUT THIS FORM: This Statement of Economic Interests has been prescribed by the Wisconsin Ethics Board pursuant to §19.44, Wisconsin Statutes. The Statement is divided into several parts. Most parts ask for information about you as well as immediate family members. The information requested concerns the previous calendar year and, for some items, requires a snapshot of economic interests held on a specified date.

Part 1 of this Statement asks you to identify your family's employers. Part 2 asks for information about your family's ownership interests in businesses and enterprises. Part 3 asks you to identify your family's real estate holdings. Part 4 asks you to identify certain of the clients, customers, and tenants of the businesses and real estate you listed in Parts 2 and 3. Part 5 asks you to identify sources from which you received business entertainment and other gifts. Part 6 asks you to identify sources from which you received honoraria or payment of expenses. Part 7 asks you to identify all other sources from which you or your family received income. Part 8 asks you to identify securities which your family owned either directly or indirectly. Part 9 asks you to identify certain organizations in which you or an immediate family member was an officer or director. Part 10 asks you to identify certain organizations of which you or your family was an authorized representative or legal agent. Finally, Part 11 asks you to identify certain of your family's creditors.

Complete each part of this Statement. If any item does not apply, check () the box marked "None or Not Applicable."

Attach additional pages if necessary.

Definitions: "Income" means gross income before deductions and depreciation, from whatever source derived, as defined by the Internal Revenue Code, but excludes dividends and interest. "Immediate family member" means your spouse, and any child, step-child, parent, or parent-in-law who receives more than one-half of his or her support from you or from whom you receive more than one-half of your support. A "lobbyist" is an individual whose duties include trying to influence legislation or administrative rules in Wisconsin by communicating with an elected state official, agency official, or legislative employee on another's behalf for pay.

- Questions about completing this form? Call (608) 266-8115.
- Other inquiries (608) 266-8123.

Part 1. Employers.

List each employer from which you or an immediate family member received income of \$1,000 or more in 1997. You do not have to identify any source of income from which you or an immediate family member received less than \$1,000. You do not have to identify any employer who is an individual unless the income you or your family received came from the individual's operation of a business or the individual was a lobbyist.

| | ile . | |
|--|--|--|
| Check (✓) if None or Not Applicab Name of employer (If State of Wisconsin, identify agency or in | City and state | General nature of business |
| The Equitable Bank, S.S.B. | Wauwatosa, WI | Savings Bank |
| | | |
| | | |
| Part 2. Ownership intere | ests in businesses. | |
| List each partnership (general, limite neluding service corporations), propusiness or enterprise in which you of ogether, owned or controlled at least an anufacturing companies, sales and service mediate family member was self-employed omers and clients in Part 4. If you or an perate under a business name, merely listenants. | r an immediate family member, ca 10% interest on the Appointmer ce operations, real estate rental, and d, but did not operate under a busine immediate family member was engat, in Part 3, the address of the real | impany, firm, franchise, or oth lirectly or indirectly, separately at Date. Businesses can include farm d professional practices. If you or ass name, merely list the business's cu |
| Check (/) if None or Not Applicable | in the state of th | <u> </u> |
| Name of business City and | state General nature of business | Form of business organization (service corporation, subchanter |
| | | S or C corporation, partnership, proprietorship, etc.) |
| | | S or C corporation, partnership, proprietorship, etc.) |
| | | S or C corporation, partnership, proprietorship, etc.) |
| | | S or C corporation, partnership, proprietorship, etc.) |
| or the businesses listed above, your identification, its officers and directors; (b) for asiness, its owners. Because limited partners do business in Wisconsain file the information is required ab low, or explain where such information is a | ntification must be sufficient to en a limited liability company, its mana erships, limited liability companies, ation with the Department of Finance out them. For other types of business | proprietorship, etc.) table a person to identify: (a) for agers or members; and (c) for any other and corporations created or registered. |
| do business in Wisconsin file this information, no further information is required ablow, or explain where such information is a | ntification must be sufficient to en a limited liability company, its mana erships, limited liability companies, ation with the Department of Finance out them. For other types of business available as a public record. | proprietorship, etc.) nable a person to identify: (a) for a gers or members; and (c) for any other and corporations created or registered in the state of the st |
| siness, its owners. Because limited partners do business in Wisconsin file this information, no further information is required ablow, or explain where such information is a Check (/) if None or Not Applicable | ntification must be sufficient to en a limited liability company, its mana erships, limited liability companies, ation with the Department of Finance out them. For other types of business available as a public record. | proprietorship, etc.) nable a person to identify: (a) for gers or members; and (c) for any other and corporations created or registered. |
| isiness, its owners. Because limited partners do business in Wisconsin file this information, no further information is required ablow, or explain where such information is a Check (/) if None or Not Applicable | ntification must be sufficient to en a limited liability company, its mana erships, limited liability companies, ation with the Department of Finance out them. For other types of business available as a public record. | proprietorship, etc.) able a person to identify: (a) for gers or members; and (c) for any othe and corporations created or registered is lightly and corporations as a matter of publicses, identify the owners and partners. |
| isiness, its owners. Because limited partners do business in Wisconsin file this information, no further information is required ablow, or explain where such information is a Check (/) if None or Not Applicable | ntification must be sufficient to en a limited liability company, its mana erships, limited liability companies, ation with the Department of Finance out them. For other types of business available as a public record. | nable a person to identify: (a) for gers or members; and (c) for any other and corporations created or registered in the company of the country of publicity is seen, identify the owners and partner of partner of the country of the |

| Name | Charles | R. | Pittelkow | |
|---------------|---------|----|-----------|--|
| 4 > 14 +44 ** | | | | |

Part 3. Real estate.

Identify all real estate located in Wisconsin in which you or an immediate family member held at least a 10% interest valued at \$5,000 on the Appointment Date. Include real estate you or your family owned directly or through: (a) a partnership; (b) a corporation; (c) a trust; or (d) other enterprise. Do not list your principal residence unless you used it for the conduct of a business or for rental purposes.

| 1 | LOL L - A | 111.0 | ** | 2.0 | 4 ** * * |
|---|-----------|------------------|------|--------|------------|
| , | auneck (| (√ :) 11 | None | or Not | Applicable |

| Location of property (street address or fire number, municipality, and county) | Type of property (e.g., farm, recreational, commercial, rental) | Nature of interest (own, lease, option, easement, land contract) | | |
|--|---|--|--|--|
| 2230 LeChateau Dr. | 1 Family/Residence | Own with spouse | | |
| Brookfield, WI, Waukesha Co | ounty | | | |
| 8446-48 W. Maple Street | 2 Family/Rental | Own with spouse | | |
| West Allis, WI, Milwaukee C | County | | | |
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Part 4. Customers, clients, and tenants (other than individuals*).

Identify every source of income of \$1,000 or more in 1997 of every business that you listed in Part 2, except a C corporation, and for every property listed in Part 3. This means identify each customer, client, tenant, and other source of income.

*Do not identify an individual unless the individual was a lobbyist.

If your business received income from a third-party payer (such as a fee, commission, or insurance payment received by a realtor, travel agent, or medical practice), list the third-party payer as well as the customer, client, or tenant.

You do not have to list:

- a corporation's sources of income if the corporation was not a service corporation or an "S" corporation under the Internal Revenue Code
- sources of income of a business in Part 2 or property in Part 3 from which you or an immediate family member received less than \$1,000.
- · an individual who was not a lobbyist
- · a decedent's estate.

| heck (✓) if None or Not Applicable | | |
|------------------------------------|----------------|-------|
| Customer, client, or tenant | City and state | |
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Part 5. Business entertainment and other gifts.

List all individuals and organizations from which you received, in 1997, entertainment or gifts having a total value of more than \$50. Include tickets to sporting or theatrical events, golfing fees, prizes, samples and promotional items, items from sales representatives or as part of business promotions, and similar items. You do not have to report gifts received by immediate family members if they were not intended for you. A "gift" includes any money, property, favor, service, entertainment, travel, or payment furnished without valuable consideration. A "gift" does not include political contributions reported to the Elections Board, or meals, beverages, or lodging that an individual offers as hospitality at his or her own expense, and not as a business expense, for reasons unrelated to your holding state public office. You do not have to report gifts from your spouse, child, parent, brother, sister, grandchild, grandparent, aunt, uncle, niece, nephew, fiancé(e), parent-in-law, grandparent-in-law, brother-in-law, or sister-in-law.

| ⊸ Check (√ |) if None | or Not Ar | pplicable |
|-------------------|-----------|-----------|-----------|
|-------------------|-----------|-----------|-----------|

| Name of giver | City and state |
|-------------------------|----------------|
| Everen Securities, Inc. | Milwaukee, WI |
| Merrill Lynch | Milwaukee, WI |
| | |
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Part 6. Honoraria and payment of expenses.

List each individual or organization from which <u>you</u> received, in 1997, lodging, transportation, meals, expenses, or honoraria having a total value of more than \$50, for attendance at a conference, presentation of a talk, participation in a meeting, or for a published work about issues initiated by or affecting state government or state agencies. Honoraria you or an immediate family member received that were unrelated to state issues should be accounted for in Part 7.

You do not have to list information about lodging, transportation, meals, money or any other thing of pecuniary value: (1) if you returned it within 30 days; (2) if you received it from the agency of which your state public office is a part; (3) if you received it from a source listed in Part 1 or Part 4; or (4) if you already reported the payment to the Ethics Board as a matter of public record.

Check (✓) if None or Not Applicable

| Payer | Approximate value of expenses | Amount of honorarium | Circumstances of receipt |
|-------|-------------------------------|----------------------|--------------------------|
| | | | |
| | | | |
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Part 7. Other sources of income.

Identify any other sources, not previously identified, from which you or an immediate family member received income (other than dividends or interest) of \$1,000 or more in 1997. Include honoraria not elsewhere reported, Social Security payments, retirement benefits, directors' fees, commissions, proceeds from the sale of real estate, and the like. You do not have to list insurance benefits, inheritances, scholarships (if no teaching or services were required in return), or Wisconsin Retirement Fund benefits. You do not have to list proceeds from the sale of securities unless you know the purchaser's identity. You do not have to list individuals, unless the individual was a lobbyist.

Check (✓) if None or Not Applicable

| Source of income | City and state |
|--|----------------|
| Robert C. Pittelkow Marital Trust, Trustee Fee | Milwaukee WT |
| Federal Home Loan Bank of Chicago, Director Fees (Term expired 12/31/97) | Chicago, IL |
| | |
| | |

Part 8. Stocks, bonds, mutual funds, and the like.

List securities, as explained below, that you and your immediate family owned on the Appointment Date whose value was \$5,000 or more on that date.

List the following types of securities:

- · stocks
- · bonds
- · mutual funds
- · money market funds
- securities issued by the State of Wisconsin
- securities issued by governmental entities within Wisconsin
- limited partnerships
- commodity futures contracts

Do not list:

- any security in which your family's interest was less than \$5,000 on the Appointment Date
- · savings accounts
- · checking accounts
- · certificates of deposit
- · annuities
- · insurance contracts
- any security issued by the federal government or a government outside Wisconsin
- any security issued by an organization that does not do business in Wisconsin

Be sure to include securities held for you or your family in:

- · a deferred compensation plan, profit-sharing plan, or pension plan whose investments you or your family directs
- · an individual retirement account (IRA)
- · a corporation, partnership, or other entity which you or your family controls.

List the security by name. Be specific. For example, list "Fidelity Puritan Fund -- mutual fund" and "IBM Corporation -- stock." Do not list "deferred compensation plan" or "IRA" or "Merrill Lynch account," since these terms do not identify the actual underlying securities.

For each security you list, place a check in one of the columns at the right to indicate the value of your family's interest in the security on the Appointment Date.'

— Check (✓) if None or Not Applicable

| Name of security | Type of security | Value \$50,000 or less | Value More than \$50,000 |
|--------------------------------|------------------------|------------------------------|--------------------------------|
| SEE ATTACHED SCHEDULE (PERSONA | TRUST, DEFERRED COMP.) | 0.000 | 100,000 |
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Part 9. Offices and directorships.

List each business, labor union, association, cooperative, or other organization of which you or an immediate family member was, on the Appointment Date, an officer or director. You do not have to identify any charitable organizations (entities to which a contribution is tax deductible); political organizations (entities whose primary purpose is to influence voting); non-profit social or community service organizations; trusts; or federal, state, or local governments or governmental agencies.

LCheck (✓) if None or Not Applicable

| City and state | Position | |
|----------------|----------|---------------------------------------|
| Milwaukee, WI | Director | |
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Part 10. Representation of organizations.

List each business, labor union, association, cooperative, partnership, or other organization of which you or an immediate family member was, on the Appointment Date, an authorized representative or legal agent. List any organization which you or an immediate family member represented in the organization's dealings with others or on whose behalf you or an immediate family member was authorized to speak. Include business clients for which you or an immediate family member provided legal representation in dealings with other parties, organizations on whose behalf you or an immediate family member publicly appeared, and partnerships in which you or an immediate family member was a general partner. You do not have to identify any charitable organizations (entities to which a contribution is tax deductible); political organizations (entities whose primary purpose is to influence voting); non-profit social or community service organizations; trusts; federal, state, or local governments or governmental agencies; or organizations for which your efforts did not include representation to third parties. You do not have to list organizations already identified in Parts 1, 2, or 9.

| ŀ | Business or c | | | | | City and s | tate | | | | | |
|---|---------------|--------------|--|--|---|-------------|--|--|--|---|--|---|
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Part 11. Creditors.

List each creditor to whom you or immediate family members, individually or together, owed \$5,000 or more on the Appointment Date. For each creditor listed, place a check in one of the columns at the right to indicate the amount owed. Include business creditors if you or an immediate family member was personally liable for the debt. Include your portion of any partnership debts.

| Creditor | City and state | Amount | Amount |
|----------------------------|----------------|---------------------|-----------------------|
| | era ja Pari | \$50,000 or less | More than \$50,000 |
| The Equitable Bank, S.S.B. | Wauwatosa, WI | | x |
| First Bank-Milwaukee | Milwaukee, WI | x | |
| Mitchell Savings Bank | Milwaukee. WI | | |

Before signing, please review your Statement to be sure that for each part, you have listed the required information or checked the box for "None or Not Applicable."

I certify that the information contained in this Statement of Economic Interests is true, complete, and correct to the best of my knowledge, information, and belief.

March 23, 1998 (414) 777-4114

Signature of person filing Date Daytime telephone number

Statements of Economic Interests are open for public inspection. The Ethics Board will notify you of the identity of any

person who examines your Statement. In accordance with §15.04(1)(m), Wisconsin Statutes, the Ethics Board states that no personally identifiable information is likely to be used for purposes other than those for which it is collected.

Failure to file a completed form may result in a forfeiture of up to \$500.

Office Review

19 3/24/18

INVESTMENTS CHARLES R. PITTELKOW

PERSONAL \$50,000 OR LESS

STOCKS:

ADVANTAGE BANK
ASSOCIATED BANC
FISERV (GREATER THAN \$50,000)
HALLMARK CAPITAL
HOME DEPOT
MIDWEST EXPRESS AIR
WALT DISNEY COMPANY

TRUST

MY BENEFICIARY INTEREST ALL \$50,000 OR LESS

MERRILL LYNCH - MONEY MARKET

STOCKS:

AT&T CORP.

AMERICAN WATER WORKS

ATLANTIC RICHFIELD

BRISTOL MYERS SQUIBB

COCA COLA

DARDEN RESTAURANTS

WALT DISNEY COMPANY

DOW CHEMICAL

EASTMAN CHEMICAL

EASTMAN KODAK

GTE CORP.

GENERAL ELECTRIC

GENERAL MILLS

IBM

JOHNSON CONTROLS

KELLOGG CO.

KIMBERLY CLARK

LUCENT TECHNOLOGIES

LILLY ELI & CO.

MARSHALL & ILSLEY CORP.

MERCK & CO.

NALCO CHEMICAL

PHARMACIA & UPJOHN

PACIFICORP

PEPSICO, INC.

SARA LEE

U.S. BANCORP

WALGREEN CO.

WICOR, INC.

WIS. ENERGY CORP.

INVESTMENTS CHARLES R. PITTELKOW PAGE 2

DEFERRED COMPENSATION \$50,000 OR LESS

EVEREN SECURITIES - MONEY MARKET STOCKS:
MIDWEST EXPRESS HLDGS.
JOHNSON & JOHNSON COMMON
MGIC INVESTMENT CORP.
HOME DEPOT INC.
ALTERNATIVE LIVING SVCS.

MUTUAL FUNDS:
ACCESSOR FDS. INC.
BARON ASSET FD.
FRANKLIN SMALL CAP.
MUTUAL SER. FD. INC.
PUTNAM FD. FOR GROWTH & INCOME
ROWE T. PRICE SPECTRUM FD., INC.